

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 807225 RECEIPT DATE: 04 / 09 / 01
IA NUMBER: PCT/ JPOO / 05336 IA FILING DATE: 08 / 09 / 00
FAMILY NAME: INOUYE DELAY WAIVED (Y/N): N
GIVEN NAME: MASAYUKI DEMAND RECEIVED (Y/N): N
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 10 / 10 / 99
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER: 33475 COUNTRY:
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000
FAX

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STATE/COUNTRY: OH ZIP: 441141484

EMAIL:

APPLICATION TITLES:
SOUND PRODUCER VOLUME CONTROL APPARATUS

TAB TO LAST POSITION, PUSH SEND



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CONFIRMATION NO. 2717

Bib Data Sheet

SERIAL NUMBER 09/807,225	FILING DATE 04/09/2001 RULE	CLASS 320	GROUP ART UNIT 2838	ATTORNEY DOCKET NO. 33475
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APPLICANTS

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**** CONTINUING DATA *******

THIS APPLICATION IS A 371 OF PCT/JP00/05336 08/09/2000 *f. ab.*

**** FOREIGN APPLICATIONS *******

JAPAN 11/226656 08/10/1999 *f. ab.*

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 12	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	Met after Allowance			
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>[Initials]</i>			

ADDRESS

116

TITLE

Volume adjuster for sound generating device

FILING FEE RECEIVED 1130	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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